



State of New Jersey

DEPARTMENT OF HEALTH AND SENIOR SERVICES

OFFICE OF EMERGENCY MEDICAL SERVICES

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NEW JERSEY EMERGENCY MEDICAL SERVICES COUNCIL

JUNE 13, 2001 MEETING MINUTES

Meeting was called to order by Dr. James Pruden at 10:10 a.m.

The meeting minutes were corrected as follows: Operations Section: If a hospital turns away an ambulance patient, and the hospital is not on divert or bypass, that action maybe an EMTALA violation.

With this correction the minutes were approved.

BLS COMMITTEE

Mary Ann Ferrara stated that this committee did not meet. Ms. Ferrara requested a list of those interested in joining the committee. The group would then revisit the mission of this committee. Ms. Ferrara apologized for the delay, and hopes to get running sometime this summer. Dr. Pruden stated that any member on the EMS Council could be a member of a committee. Additionally, committee members do not have to be EMS council members. A complete list of all committee members should be given to the chair. Ms. Ferrara was wondering if there were any specific members of the EMS council who should be members of the BLS committee. Chief Al Lincks has volunteered and Mary Ann Ferrara will be in touch with him. Also, Victor Carter (OEMS) will be part of this committee

Motion to Accept Report, Second, Discussion –none
Report Accepted

BY LAWS COMMITTEE REPORT

Dr. Jennifer Waxler is at home with new baby boy. Dr. Waxler received awards from the NJ EMS Council and the NJ Chapter of the American College of Emergency Physicians (ACEP) for the Medical Director of the Year. Congratulations! Ms. Nancy Kelly-Goodstein volunteered to give the by-laws report. At the last meeting copies of the by-laws with the recommended changes were distributed. Two changes were recommended to formally add the EMS Communications Committee 1. (Page 9) and 2 sending reminder letters in lieu of reprimand letters (page 3). Those changes were incorporated. A motion was made to accept the by-laws as amended effective with today's date

Motion to Accept Report, Second, Discussion-none
Report accepted

INTRODUCTIONS:



NEW JERSEY
Many Faces. One Family.

Dr. James Pruden introduced Chief Jim Davidson of the New Jersey Career Fire Chiefs Association, Mr. Ron Czajkowski representing the New Jersey Hospital Association and Dr. David Livingston from the Trauma Council.

COMMUNICATIONS

This is the first official report to the council. Mr. Robert Resetar and the Communications Committee thanked the EMS Council for allowing them to participate. The committee met last week for their quarterly meeting and the first order of business was to discuss a name change. The group has been in existence longer than the EMS Advisory Council, and would like their name to reflect more of what they do. Mr. Resetar will keep us posted on the adoption of a new name. Another topic discussed was about helicopter dispatch, and streamlining the aero-medical response. The statewide EMS radio system put in operation by the NJ State Police and Office of Emergency Management is working well. When the system is complete the EMS Communication Centers throughout New Jersey that dispatch paramedic units will have access to a statewide radio channel for interagency communications. Currently half of the ALS Dispatch Centers are operational (working toward completing the system) along with the ten NJ Trauma Centers and the Burn Center at St. Barnabas. This system provides us with another link in the event of phone failures similar to what we had with Hurricane Floyd. The final item discussed was in regards to the Metropolitan Medical Response System (MMRS). The Communications Committee has appointed a representative to that committee. Items to be discussed include how they handle bed status and how they can better communicate their mutual aid plan.

Motion to Accept Report
Second

Discussion: Dr. Pruden asked about the interface between the communications center and trauma and burn centers. The NJ State Police has a statewide radio network. This system interfaced with the state police network, and is limited to EMS dispatch, MICU and regional dispatch centers. It is an open line of communications that we have never had before. It is more of a network than a device.

Dr. Pruden also mentioned that at our last meeting we discussed the potential of using a web site for identifying hospitals that are on bypass or divert status. Mr. Resetar stated that he believes that this is being worked on by the Department of Health and Senior Services. A grant application was submitted by the Communications Committee to fund this initiative. Dr. Pruden also requested additional information regarding the Metropolitan Medical Response System. The team falls under the federal government as part of the federal training program for 120 high-risk cities (Newark, Jersey City, New York City). University Hospital in Newark and Jersey City Medical Center are actually working cooperatively to create an organized response to the MMRS planning process. Mr. Marty Hogan asked if this additional communications mechanism has been discussed with the representatives of statewide mobilization of volunteers. Mr. Resetar stated that the NJ State First Aid Council mobilization team also has radios on the network, as does representatives from the Office of Emergency Medical Services (OEMS). Mr. Hogan asked if the individual MICU vehicles would have access to this radio system? Mr. Resetar stated that this level of communication is limited to communications centers and select portable users such as the NJ First Aid Council and OEMS.

Mr. McCabe stated that at the last meeting we had discussed including the Communications Committee as part of the EMS Council, but the minutes state that they will be a liaison to the council. Mr. McCabe asked if they would become part of the EMS Council.

If the EMS Council wants to add the Communications Committee it would require a change to the Executive Order from the Commissioners Office.

Report Accepted.

Mr. McCabe made a motion that the Communications Committee become an official part of the NJ State EMS Council and has a seat as such.

Motion was seconded

Discussion: Dr. Pruden will make the recommendation to the Commissioner.
Motion Accepted.

EMT TRAINING FUND

Dr. Pruden asked Mr. Robert Dinetz to give the report in Ms. Deborah Murante's absence. Mr. Dinetz stated that at the March 28, 2001 meeting there was a vote to approve \$15 per credit for reimbursement of the Pediatric Education for Prehospital Professionals (PEPP) Course. There were a number of continuing education program providers who came to the EMT Training Fund Council this past year requesting an increase of the \$5 per CEU. This was not an official report.

MICU ADVISORY COUNCIL

Dr. Pruden stated that one of the initiatives the MICU Advisory Council would like to do is a study on acute chest syndrome. (Do the patients do any better or get out of the hospital sooner-with or without paramedic intervention). A second initiative is to establish a 5 year plan. This will be discussed under new business. Also mentioned was a study of basic life support providers administering albuterol for asthmatics. The study was conducted in New York City. The MICU Advisory council agreed to look at the New York information. There were a number of changes in the adult standing orders. There are some additional items that Ms. Sue Caputo will present in the legislative report.

Motion to Accept Report, Second, Discussion – none

NJ POISON INFORMATION EDUCATION SERVICES

Dr. Steven Marcus reported there is not much new except they will be moving within eight months from their present location. They are looking for another location. He will keep us posted.

Motion to accept report, Second, Discussion-none

Report accepted

NJ OFFICE OF EMERGENCY MANAGEMENT

Mr. Robert Hansson reported that the Weapons of Mass Destruction (WMD) exercise scheduled for Newark has been postponed until 2002. The search and rescue resources include urban flood rescue services. The 60 member swift water flood rescue unit will assist local rescuers. The July 4th celebrations will include activities at Liberty Park in Hudson County.

Motion to accept report, Second, Discussion-none.
Report accepted.

NJ STATE FIRST AID COUNCIL

Ms. Mary Ann Ferrara reported progress.
Motion to accept report, Second, Discussion – none.
Report accepted.

EMSC ADVISORY COUNCIL

Ms. Kelly-Goodstein reported in Dr. Leva's absence. The July 31, 2001 meeting, date and location may be changed, so please contact our office for the meeting specifics should you plan on attending. At our May 22, 2001 EMSC Advisory Council Meeting we had a presentation from a young lady who wants to make it CPR training mandatory for graduation from middle school. EMSC Advisory Council is looking to expand its membership to include representatives from NJ State School Nurse Association, the NJ Trauma Council, NJ Safe Kids, and American Society of Pediatric Nurses. Ms. Kelly-Goodstein asked Dr. Marcus if he had announced the new national poison

control telephone number (800-222-1222), and he advised that he had at our March meeting. The NJ EMSC Program conducted our 2nd Annual Caring for New Jersey's Children's conference. Ms. Kelly-Goodstein thanked everyone for their help and stated that we doubled the enrollment from last year. We are hoping to double attendance again in 2002. Also, of note nearly one third of the participants were school nurses. The conference feed back was positive and should you have a topic that you may want presented next year, please forward them as soon as possible.

We are in the process of retooling the targeted issue grant application to fund the emergency department pediatric critical care registry. That application will have to be submitted in the fall.

The EMSC Advisory council is also retooling the pediatric standing orders and suggested radio failure protocols to bring them in line with the new American Heart Association (AHA) guidelines. The on-call physician response time regulation was published in April.

The Department is in the process of reviewing and responding to the comments to the proposal.

Finally, in conjunction with the Department of Education and Family Health Services we presented six "Diabetes in the School" Seminars in April and May. We reached about 900 school nurses and we are hoping to offer another series, perhaps focusing on Traumatic Brain Injury.

Motion to accept the report, Seconded

Discussion-Dr. Pruden commented that the conference was well put together. The EMS Awards luncheon was very nice also. Mr. Fred Steinkopf's suggestion was that next year we hold the conference on Saturday so that more volunteers can also attend. Ms. Kelly-Goodstein was thinking of maybe a two-day conference next year to try to accommodate everyone.

Discussion moved to the Automatic External Defibrillators (AED)'s in schools. Ms. Ferrara said there is a bill proposal that would require AED's to be available in the schools at athletic events.

Report accepted.

LEGISLATIVE COMMITTEE

Mr. Marty Hogan deferred to Ms. Sue Caputo: **A179/S1656** would establish a program for advanced airways for the EMTs (referred to the Senate Committee last year-no vote).

Bill **A2556** would enable First Responders, EMT's and Camp Directors to administer EpiPens, if it is prescribed for the child. (referred to the Assembly Health Committee-reported favorably, and sent to the Assembly Appropriations Committee-no action).

A2526 & S1386 – would enable EMT's to carry and decide when to administer the EpiPen (referred to committee last June-no activity).

A2607-Health Care Facilities trying to restrict hourly employees from mandatory overtime work (vetoed by the Governor last year-no action).

A3251-introduced in the last legislation session, it requires an impact statement on proposed regulations that would affect volunteer ambulance squads and fire companies. The impact statement would be reviewed by the EMS Council (passed by the Assembly and referred to the Senate).

A924 –Was introduced last legislative session and it died in session. It was reintroduced January 2000 and it gives firefighters and paramedics certified by the Commissioner the ability to provide ALS services under direction of an authorized hospital (sent to the Assembly last January-no activity). Ms. Caputo looked at other websites and found that there is a statewide association that would support this bill the MICU Advisory council is not supportive of this bill. Ms. Caputo suggested that the EMS Council strongly oppose this bill.

Mr. Hogan reported that the new HCFA regulations would probably not be published until the fall. We also know from Kim Champie, Friethysen's aide, the topic seems to be on quarter-to-quarter bases. Frielinhsens office has been great with the EMS coalition. We have received the same letter 4 times regarding this issue.

President Bush nominated Thomas Scully as head of HCFA. HCFA wants to do an image makeover and now wants to be called the "Medicare and Medicaid Association" with the acronym of MMA.

Also on March 24th Congressman Andrews in Maple Shade did a press release and he will follow up with a letter to the editor for a large South Jersey paper regarding the whole HCFA issue, as a threat to the NJ EMS System. Within the state, Assemblywoman Vandervalk is working on a resolution for a state level solution should the need arise. Yesterday, members of the Coalition met with Assemblyman Tom Kean, Jr. to discuss the HCFA issue. (Mr. Kean was appointed to fill Alan Augustine's Assembly seat.)

Motion to accept report, Seconded

Discussion-Ms. Ferrara discussed why the NJ State First Aid Council (NJSFAC) is opposed to both of the EpiPen bills. First one of the bills places the EMT into the same category as camp workers. The second bill would require some kind of regulation. The NJSFAC strongly feels epinephrine is a good drug, but the administration of the EpiPen should be medical protocol and not a regulation.

Dr. Livingston discussed his personal experience with the EpiPen issue. A discussion ensued as to the medical pros and cons of epinephrine administration by EMTs.

A motion was made to form an adhoc committee to review the bills. The motion was seconded. The members who volunteered for the committee include Dr. Marcus, a representative from ACEP, NJSFAC, and Dr. Leva (to be contacted by Dr. John Brennan). Dr. Pruden suggested that Dr. Marcus chair the committee. The bill was introduced by Assemblywoman Vandervalk. Mr. Howie Meyer NJSFAC Legislative Committee, commented that pre loaded syringes and/or epinephrine should be allowed on the BLS units. Mr. Meyer has discussed this bill with Assemblywoman Vandervalk. Assemblywoman Vandervalk understands the concern of the NJSFAC will support a change to medical protocol.

DIVERT & BYPASS

Mr. McCabe did receive a communication from Kathy Cordea (NJ Hospital Association) regarding the June 26th meeting on the divert issue. The ten-year-old diversion report will be reviewed and if needed, updated. The September 25th conference at the NJ Hospital Association will provide an opportunity to the showcase practices established by some of the hospitals to avoid going on divert and bypass. Both reports accepted.

Motion to accept report, Seconded, Discussion- none

Report accepted

PROFESSIONAL EDUCATION

Mr. Robert Dinetz stated that most of his report could be found in the attachment to these minutes. On October 5 & 6, 2002 the Atlantic EMS Consortium Contortion will be hosting a symposium for EMS educators at the Sheraton Premier at Tyson's Corner Virginia. The Consortium was established in the late 1970's and included New Jersey, Pennsylvania, Delaware, Maryland, Virginia, West Virginia and Washington DC. The 2002 program will focus on enhancing and assisting both basic and advanced life support instructors. There will be approximately 150 rooms and 250 slots for attendees, registration will be on a first come, first serve basis. The anticipated room rate is \$95.00 per person and the registration fee will be less than \$100.00. The Consortium is requesting a grant from the National Highway Traffic Safety Administration to help subsidize the cost of the program. As soon as the final information is available, Mr. Dinetz will forward it.

Effective July 1, 2001, the National Registry exams will reflect the new guidelines as established by the American Heart Association. There will be no transition period, so any candidate fails the National Registry test, (EMT, paramedic, intermediate, first responder) and retest after July 1, 2001 will have the new exam.

Also, the Department has received a request from Hudson County Community College to enter into a discussion for the possibility of establishing a new paramedic didactic training program (clinical agreements with Jersey City

Medical Center MICU.) We have had one formal meeting to address their request and follow up meeting will be scheduled.

Lastly in early April we sent a mailing statewide to the EMT programs on information on Do Not Resuscitate (DNR) and living wills. This information is to be included in the instructional programs. There are additional copies available in our office if anyone is interested. It is not new material, just condensed. The packet was reviewed by Jeannie Kerwin before it went out.

Motion to accept report, Seconded

Discussion-When does Jersey City Medical Center hope to get the paramedic program off the ground? Mr. Dinetz responded that we are quite awhile away (6 months or longer). Mr. Hansson stated that NJ Hospital Association on this Friday from 9am to 12pm would have Dr. Harrold Segalson presenting information on Mass Casualty resulting from weapons of mass destruction.

Report accepted.

TRAUMA COUNCIL

Dr. David Livingston stated that in the March 14th minutes Dr. D'Amelio's name was spelled incorrectly. No movement regarding Personal Insurance program (PIP). There is concern for the repeal of motorcycle helmet law and introduction of legislation for safe hand guns. There is a lack of funding to support each Emergency Department having a trauma register.

Motion to accept report, Discussion-none

Mr. Fred Steinkopf mentioned that in the more rural parts of the state the EMT's on the scene have to make a decision as to whether we fly or drive the patient to the hospital. A number of factors are used to determine whether to fly or drive the patient. There have been instances where erroneous dispatch times are given for the helicopter and EMS waited only to transport the patient by ground. Mr. Steinkopf feels that there is a problem with the 8-minute rule. An out of state helicopter maybe 7 minutes away, but we have to wait for the New Jersey helicopter because of the 8-minute rule. There is a public perception that waiting is bad, and whether it is true or not is not the issue. Mr. Hogan attended the JemSTAR meeting where this issue was raised. At the MICU Advisory Council meeting the issue was discussed in very global terms. The JemSTAR committee maybe reviewing the issue, but the information has not yet been shared publicly. The issue of the helicopters' location was also discussed. Dr. Pruden stated that we need involvement of the JemSTAR committee, as well as those that are directly affected. The state will need to be there to coordinate. Mr. Duffy stated that the JemSTAR committee has representation from all those concerned and affected parties on it. (NJSFAC, Paramedic Assoc., Trauma Services) The JemSTAR committee is working on this issue. Dr. Pruden suggested to Mr. Steinkopf that their representative to the JemSTAR committee continue to pursue this issue. Dr. Pruden stated that since the JemStar committee reports to the MICU Advisory council he would reach out for the MICU Advisory council chair to request a report at their next meeting.

PUBLIC COMMENT PERIOD

Lou Sasso-RWJUH, New Brunswick-Please keep the basic and advanced life support regulations in focus. Critical Care transport is suffering because the regulations are not out there.

Howie Meyer, NJSFAC

The automatic external defibrillator (AED) can save people in cardiac arrest, yet none of the proposed bills discuss the training and/or equipment needed in addition to the AED. Mr. Meyer believes there is a bill pending that would require all NJ State Police Officers to be EMT certified because of the AEDs. The State Police do not carry any extra medical equipment, but they are trained. Mr. Meyer and other have been discussing the administration of aspirin by EMTs for patients experiencing chest pain. Mr. Meyer would like to suggest that in addition to reviewing the administration of EpiPens we also look at aspirin.

REMINDER-The ByLaws require a report from each committee chair be sent to OEMS 5 weeks prior to upcoming EMS Council meeting. If you know ahead of time that you will not be attending the meeting, please advise your alternate and the Department of Health and Senior Services. A request was made to move the meeting from September 12th to September 19th. A poll was taken, the members did not agree to the change of meeting date

The EMS Council thanked the Allentown First Aid Squad for their hospitality and Mr. McCabe for the food.

Meeting Adjourned.